

CLAIMS ONLY

Application Number

101189549

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend				
1							61			
2							62			
3							53			
4							64			
5							65			
6							56			
7							57			
8							68			
9							59			
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44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	4						Total Indep			
Total Depend	18						Total Depend			
Total Claims	22						Total Claims			